

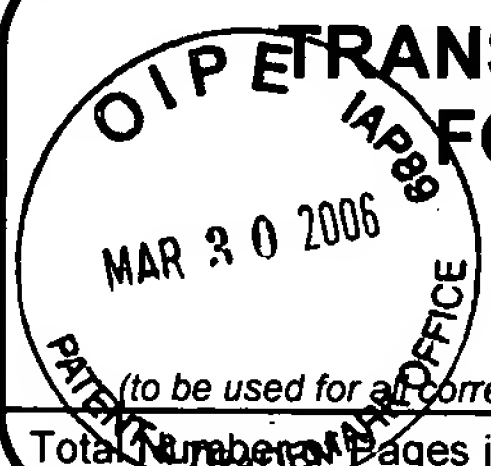
CFW 2631A

PTO/SB/21 (09-04)


Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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 <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/584,189
	Filing Date	May 31, 2000
	First Named Inventor	Seung--Chan BANG, et al.
	Art Unit	2631
	Examiner Name	BURD, Kevin Michael
Total Number of Pages in This Submission	Attorney Docket Number	1109.1181.US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): IDS/PTO/SB/08a with 4 references; and Credit Card Payment Forms
<div style="border: 1px solid black; padding: 5px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	H.C. Park & Associates, PLC		
Signature			
Printed Name	Hae-Chan Park		
Date	March 30, 2006	Reg. No.	50,114

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name		Date	

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 350.00

Complete if Known

Application Number	09/584,189
Filing Date	May 31, 2000
First Named Inventor	Seung-Chan BANG, et al.
Examiner Name	BURD, Kevin Michael
Art Unit	2631
Attorney Docket No.	1109.1181.US

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____
☒ Deposit Account Deposit Account Number: 50-3698 Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments
Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	\$0.00
Design	200	100	100	50	130	65	\$ 0.00
Plant	200	100	300	150	160	80	\$ 0.00
Reissue	300	150	500	250	600	300	\$ 0.00
Provisional	200	100	0	0	0	0	\$ 0.00

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)
Each independent claim over 3 (including Reissues)
Multiple dependent claims

Fee (\$)	Small Entity Fee (\$)
	Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
\$360.00	\$ 0.00

Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)
89	-20 or HP=82 7	x \$50.00	= \$350.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee(\$)	Fee Paid (\$)
13	- 3 or HP= 14 0	x \$200.00	= \$ 0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE


If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = 0	/ 50 =	0 (round up to a whole number)	x \$250.00	= \$ 0.00

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	\$ 0.00
Other (e.g., late filing surcharge) :	\$ 0.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	50,114	Telephone	703.288-5105
Name (Print/Type)	Hae-Chan Park	Date	March 30, 3006		

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